Northstar Church Family Release Form:

Release of liability: As a parent or guardian, I do herewith authorize and release the following person(s) to be transported to and from a church event in a personal vehicle or other authorized transportation.

I agree not to hold Northstar Church and/or its caregivers liable for any accident or injury that might occur. In the event of an accident, I do hereby release Northstar Church and its authorized drivers from any liability.

I authorize the treatment of a qualified and licensed medical doctor to the following person(s) in the event of a medical emergency which, in the opinion of the attending physician, may endanger his/her life, cause disfigurement, physical impairment or undue comfort if delayed.

For each Family: I agree not to hold Northstar Church and/or its caregivers liable for any accident or injury that might occur while on Northstar Church properties or on a planned, supervised activity away from the church. I agree not to pursue any legal action should an accident or injury occur.

Parent(s)/Guardian(s) of Family: _____

Minor: _____ Date of Birth: _____ M ____ F ____

Minor: _____ Date of Birth: _____ M ____ F ____

Minor: _____ Date of Birth: _____ M ____ F ____

Minor: _____ Date of Birth: _____ M ____ F ____

Address: _____ Phone # _____.

My signature also serves to indicate my willingness to take full financial responsibility for any and all medical services rendered for the above named participants. My signature also serves to indicate my willingness for my insurance company: _____ Policy # _____ to be billed for any and all medical fees and services should they be needed and to release Northstar Church from this liability.

Family Doctor: _____ Phone # _____

List Allergies, Chronic Illness, or other conditions: _____

Contact Person in case of emergency: _____ Phone # _____

_____ _____

Parent/Guardian Signature Date Witness

_____ ( )

Notary Public required for this form

Personally known to me: _____

Produced identification: _____